

POSITION	INITIALS	ID NO.	DATE
TERMINATION	AS		05/23/10
CLASSIFIER		19	5-0-5
QUALITY REVIEW	HH	5811	06-23-20
RESPONSE FORMALITY REVIEW	h20	5966-1	11-1-20

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	0	0	05/23/10
2	0	0	11/30/04
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If more than 150 claims or 10 actions  
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